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DEC 0 6 2004

Application No.: 10/826,805

Docket No.: JCLA12240

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

SHEI et al.

Examiner

NADAY, ORI

Serial No.:

10/826,805

Art Unit

2811

Filed

04/16/2004

Docket No.

: JCLA12240

For

Flip-Chip Light Emitting Diode

Package Structure

AMENDMENT AND RESPONSE TO OFFICE ACTION

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

The Office Action dated 10/04/2004, has been carefully considered. In response thereto, please enter the following amendments and consider the following remarks.

Page 1 of 10

_12/22/2004 CBROWN3 00000003 500710 - 10826805

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18.00 DA

PAGE 3/12 * RGVD AT 12/6/2004 7:42:00 PM (Eastern Standard Time) * SVR:USPTO-EFXRF-1/2 * DNIS:8729305 * CSID:19495600809 * DURATION (mm-ss):03-28

MOND

	10/826.805												
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			13			•	Г	RATE	FEE	7	RATE	FEE	
F	OR	NUMBER FILED NUM		NUME	BER EXTRA	В	ASIC FE	E 385.00) JOB	BASIC FEE	+		
TOTAL CHARGEABLE CLAIMS			23 minus 20= * 5		· -	3		XS 9=	197	ОЯ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
INDEPENDENT CLAIMS			9_minus 3 =				 	X43=		1		 	
м	ULTIPLE DEPE	NDENT CLAIM F	RESENT			F			-IOR				
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+145=	440	JOR	L		
								TOTAL	412	JOR	TOTAL	<u> </u>	
	12 6 of CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 25	Minus	- 2	. 2		X\$ 9=	18.00	OR	X\$18=			
	Independent	1. 2	Minus	3	3	-		X43=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=			+290=		
								TOTAL		OR OR	TOTAL		
		ADI	DIT. FEE		Jon.	ADDIT. FEE	L., <u>+</u>						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHES NUMBEI PREVIOUS PAID FO	T A SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	Image: content of the	(\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	 	(43= .	•	OR	X86≃		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.									OR	+290=		
								TOTAL IT. FEE	•	OR ,	TOTAL ODIT. FEE		
(Column 1) (Column 2) (Column 3)								٠				•	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA	R	ATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	•		-	X	\$ 9=		OR	X\$18=		
	Independent	NTATION OF MU	Minus	ENDENT CI	1.	-	X	43=		OR	X86=		
	ingi FRESE	INTO NO P MO	LIIFLE DEP	ENDENI CL	_~1M		+1	45=		OR	+290=		

FORM PTO-875 (Rev. 10/03)